

ROUTING AND TRANSMITTAL SLIP

15 SEP 82

| TO: (Name, office symbol, room number, building, Agency/Post) | Initials | Date |
|---|----------|--------|
| 1. C, DET G | SUSPENSE | 20 SEP |
| 2. C, FAD | " | 23 SEP |
| 3. SUBJ: INVESTIGATIVE HYPNOSIS | | |
| 4. | | |
| 5. | | |

| Action | File | Note and Return |
|--------------|----------------------|------------------|
| Approval | For Clearance | Per Conversation |
| As Requested | For Correction | Prepare Reply |
| Circulate | For Your Information | See Me |
| Comment | Investigate | Signature |
| Coordination | Justify | |

REMARKS

PLS COMPLY W/ OF AND RM
TO THIS OFC NLT 23 SEP 82.

DO NOT use this form as a RECORD of approvals, concurrences, disposals, clearances, and similar actions

| | |
|--|----------------|
| FROM: (Name, org. symbol, Agency/Post) | Room No.—Bldg. |
|--|----------------|

| | |
|----|-----------|
| XO | Phone No. |
|----|-----------|

8041-102

OPTIONAL FORM 41 (Rev. 7-76)

Prescribed by GSA